

## **Application Data Sheet**

### **Application Information**

<b>Application Type::</b>	Regular
<b>Subject Matter::</b>	Utility
<b>Suggested classification::</b>	
<b>Suggested Group Art Unit::</b>	
<b>CD-ROM or CD-R?::</b>	None
<b>Computer Readable Form (CRF)?::</b>	No
<b>Title::</b>	System and Method for Storing, Creating, and Organizing Financial Information Electronically
<b>Attorney Docket Number::</b>	055555-0233
<b>Request for Early Publication?::</b>	No
<b>Request for Non-Publication?::</b>	No
<b>Suggested Drawing Figure::</b>	1
<b>Total Drawing Sheets::</b>	16
<b>Small Entity?::</b>	No
<b>Petition included?::</b>	No
<b>Secrecy Order in Parent Appl.?::</b>	No

### **Applicant Information**

<b>Applicant Authority Type::</b>	Inventor
<b>Primary Citizenship Country::</b>	US
<b>Status::</b>	Full Capacity
<b>Given Name::</b>	William
<b>Family Name::</b>	CHENEVICH

**City of Residence::** Portland  
**State or Province of Residence::** Oregon  
**Country of Residence::** US  
**Street of mailing address::**  
**City of mailing address::** Portland  
**State or Province of mailing address::** OR

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Linda K.  
**Family Name::** GARNER  
**City of Residence::** Cincinnati  
**State or Province of Residence::** Ohio  
**Country of Residence::** US  
**Street of mailing address::** 5003 Village Dr.  
**City of mailing address::** Cincinnati  
**State or Province of mailing address::** OH  
**Postal or Zip Code of mailing address::** 45244

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Gary L.  
**Family Name::** HODGE  
**City of Residence::** Minneapolis

**State or Province of** Minnesota  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 6840 Blaine Ave. East  
**City of mailing address::** Minneapolis  
**State or Province of mailing address::** MN  
**Postal or Zip Code of mailing address::** 55076

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** India  
**Status::** Full Capacity  
**Given Name::** Lakhbir  
**Family Name::** LAMBA  
**City of Residence::** Lakeville  
**State or Province of** Minnesota  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 16520 Interlachen Blvd.  
**City of mailing address::** Lakeville  
**State or Province of mailing address::** MN  
**Postal or Zip Code of mailing address::** 55044

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Andrew J.  
**Family Name::** LANG

**City of Residence::** Lake Oswego  
**State or Province of Residence::** Oregon  
**Country of Residence::** US  
**Street of mailing address::** 17538 Brookhurst Dr.  
**City of mailing address::** Lake Oswego  
**State or Province of mailing address::** OR  
**Postal or Zip Code of mailing address::** 97034

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Jon D.  
**Family Name::** RUNDQUIST  
**City of Residence::** Chisago City  
**State or Province of Residence::** Minnesota  
**Country of Residence::** US  
**Street of mailing address::** 10879 Green Lake Tr.  
**City of mailing address::** Chisago City  
**State or Province of mailing address::** MN  
**Postal or Zip Code of mailing address::** 55013

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Paige W.

**Family Name::** VINALL  
**City of Residence::** Minneapolis  
**State or Province of** Minnesota  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 3460 Golfview Dr. #2221  
**City of mailing address::** Minneapolis  
**State or Province of mailing** MN  
**address::**  
**Postal or Zip Code of mailing** 55044  
**address::**

#### **Correspondence Information**

**Correspondence Customer Number::** 23524  
**E-Mail address::** PTOMailMadison@Foley.com

#### **Representative Information**

<b>Representative Customer</b> <b>Number::</b>	23524	
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#### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent</b> <b>Application::</b>	<b>Parent Filing</b> <b>Date::</b>

### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

### Assignee Information

**Assignee name::** U.S. Bank Corporation